2002 Consumer Satisfaction

For

Comtrea Community Treatment

A Substance Abuse Traffic Offenders Program (SATOP) of the

Division of Alcohol and Drug Abuse Missouri Department of Mental Health



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Thanks to the many people who completed the survey and to the staff of participating agencies. Thanks to the members of the Consumer Satisfaction Work Group, the Outcomes Work Group and the Performance Measurement Group.



August 2002

DMH Satisfaction Survey Results Consumer Satisfaction - 2002

Substance Abuse Traffic Offenders Program (SATOP)

Agency: Comtrea Community Treatment

Demographics

	Total State	Total Agency	Total CIP State	Total CIP Agency
SEX Male	77.9%	66.7%	86.3%	66.7%
Female	22.1%	33.3%	13.7%	33.3%
RACE White	87.8%	100.0%	88.3%	100.0%
Black	7.5%	0%	6.8%	0%
Hispanic	2.4%	0%	1.9%	0%
Native American	1.1%	0%	2.9%	0%
Asian/Pacific Islander	0.5%	0%	0%	0%
Other ^a	0.7%	0%	0%	0%
MEAN AGE	31.51	32.17	35.36	32.17
0-17	3.5%	0%	2.0%	0%
18-49	87.6%	100.0%	92.1%	100.0%
50+	8.9%	0%	5.9%	0%

Of the 6 forms returned, 6 identified the type of SATOP program.
^a Biracial is included with Other

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Sample Size

Information is based on the number of returned forms and the number of people served according to the DMH billing records. The forms sent to the agency did not indicate program type (e.g., WIP). The program type was to be entered on the form as the forms were distributed. Many forms, however, were received with the program type not indicated. Since an accurate count of forms received by individual programs cannot be calculated, this column is left blank.

	Number Served April 2002	Number Forms Returned	Percent of Served Returned*
Total State		1753	
Total Agency		6	
CIP		6	
ADEP		0	

Of the 5 form returned, 5 identified the type of SATOP program.

Services for the Deaf or Hard of Hearing

The following represents the percentage of affirmative responses for each item.

	Overall Agency Totals		CIP Pr To	_	
	State	Agency	State	Agency	
Are you deaf or hard of hearing?	4.5%	0%	8.8%	0%	
<i>If yes,</i> do you use sign language?	0.3%	0%	1.4%	0%	
If you use sign language, did this agency use sign language without the help of an interpreter?	2.8%	0%	2.6%	0%	
If you use sign language and the staff did not sign to you, was an interpreter provided?	3.0%	0%	3.0%	0%	

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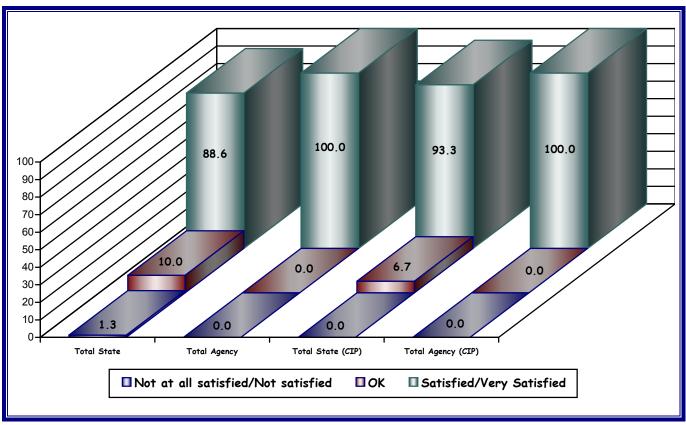
^{*}A return rate could not be calculated due to the State not being able to determine the number of persons served.

Medicaid

In 2002, the Consumer Satisfaction Survey asked questions about Medicaid. The results of those questions are below and represent the percentage of affirmative answers. In addition, consumers were asked to identify which MC+ plan they carried. Two persons reported being a member of an MC+ Health Plan and one person identified the plan they carried to be Healthcare USA. The other consumer did not identify a plan.

	All Programs		CIP Program Total	
	State	Agency	State	Agency
Do you receive Medicaid?	8.4%	33.3%	12.9%	33.3%
If yes, are you a member of an MC+ health plan?	17.7%	66.7%	21.6%	66.7%

Overall Satisfaction with Services



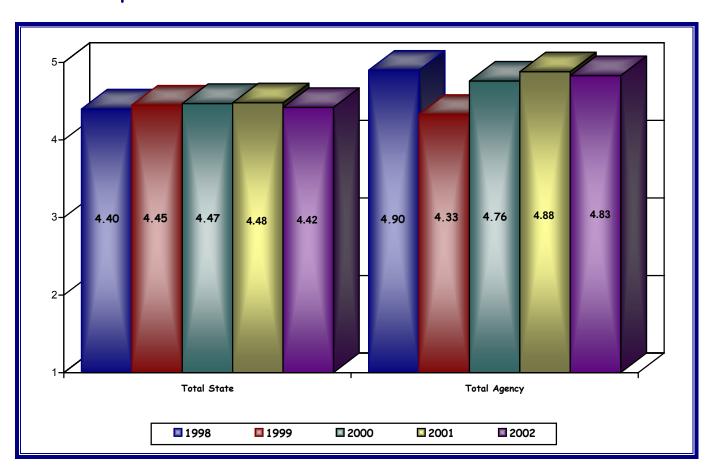
Program Satisfaction: Percent of responses to the question "How satisfied are you with the services you receive?"

Some of the key findings were:

- Statewide, 88.6% of the consumers of SATOP services who responded to the survey were "satisfied" or "very satisfied" with the services they received.
- The percent of individuals at this agency, who rated services as "satisfied" or "very satisfied", was higher than the state average (100.0% for this agency versus 88.6% for the state).
- This agency's CIP program was rated higher (100.0% of the consumers reporting "satisfied" or "very satisfied") than the statewide rating (93.3%).

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Service Means Comparison of 1998, 1999, 2000, 2001, & 2002



Comparison of 1998, 1999, 2000, 2001, and 2002 Mean Ratings

Some of the key findings were:

- The mean of the responses from this agency's consumers to the question "How satisfied are you with the services you received?" was 4.90 in 1998, 4.33 in 1999, 4.76 in 2000, 4.88 in 2001 and 4.83 in 2002.
- For this agency, the mean to the service question decreased slightly from 2001 (mean= 4.88) to 2002 (mean= 4.83).

Satisfaction with Services

	Total		CIP		
	Consumers ^a		Prog	gram	
How satisfied are you	State	Agency	State	Agency	
1. with the agency staff who provide you with	4.43	4.83	4.39	4.83	
services?	(1715)	(6)	(107)	(6)	
2. with our counselor/instructor?	4.59	4.83	4.62	4.83	
	(1717)	(6)	(107)	(6)	
3. with how much your agency staff know about how	4.41	4.67	4.43	4.67	
to get things done?	(1720)	(6)	(108)	(6)	
4. with how program staff keep things about you or	4.46	4.67	4.56	4.67	
your life confidential/private?	(1703)	(6)	(107)	(6)	
5. that the program staff is assisting you achieve	4.47	4.50	4.58	4.50	
the goals of driving without drinking?	(1692)	(6)	(107)	(6)	
6. that the agency staff who provide services to	4.50	4.67	4.52	4.67	
you respect your ethnic and cultural background?	(1664)	(6)	(100)	(6)	
7. with the services that you receive?	4.42	4.83	4.41	4.83	
	(1718)	(6)	(104)	(6)	
8. that services are provided in a timely manner?	4.30	4.83	4.23	4.83	
	(1721)	(6)	(107)	(6)	
9. with how easy it is to get to services?	4.27	4.83	4.11	4.83	
	(1711)	(6)	(106)	(6)	
10. with how easy it is to get to contact the	4.31	4.83	4.46	4.83	
agency?	(1701)	(6)	(106)	(6)	
11. with how you spend your time while at the	4.24	4.83	4.31	4.83	
agency?	(1713)	(6)	(108)	(6)	
12. with where the agency is located?	4.17	4.50	4.27	4.50	
	(1721)	(6)	(108)	(6)	
How safe do you feel					
13. in the agency/program site?	4.47	4.67	4.52	4.67	
- · · · -	(1707)	(6)	(106)	(6)	
14. in the neighborhood of the agency/program	4.41	4.67	4.47	4.67	
site?	(1709)	(6)	(107)	(6)	
The first number represents a mean rating.					

The first number represents a mean rating.

Scale (items 1-12): 1=Not at all satisfied . . . 5=Very satisfied.

Scale (items 13-14): 1=Not at all safe . . . 5=Very safe.

The number in parentheses represents the number responding to this item.

^aThe number of consumers in each program may not add to the total number of consumers served because the type of program (e.g., WIP) was not indicated on many forms.

Some of the key findings were:

- Statewide, the people served by the SATOP programs reported that they were satisfied with the services they received. For this agency, the mean scores ranged from 4.50 to 4.83.
- The people were most satisfied with the staff, their counselor/instructor, services received, services being provided in a timely manner, ease of getting services, ease of contacting the agency, and how they spent their time while at the agency. They were least satisfied with the location of the agency.

Agency: Comtrea Community Treatment

Outcome

Due to my SATOP	Total		CIP	
experience	Consumers		Program	
	State	Agency	State	Agency
15. I am less likely to drink and drive in the	4.48	4.67	4.57	4.67
future	(1721)	(6)	(108)	(6)
16. My drinking habits will	4.20	4.50	4.44	4.50
change	(1720)	(6)	(108)	(6)
17. My understanding of	4.41	5.00	4.44	5.00
alcohol or drugs has improved	(1724)	(6)	(108)	(6)
18. I now better	4.06	4.50	4.19	4.50
understand myself	(1719)	(6)	(107)	(6)
19. I now spend less	4.10	4.67	4.52	4.67
money on alcohol/drugs	(1711)	(6)	(108)	(6)
20. I better understand	4.47	4.67	4.46	4.67
Missouri's DWI laws and	(1723)	(6)	(108)	(6)
penalties for DWI	(1/20)	(0)	(100)	(0)
21. My attitude toward	3.74	4.33	4.00	4.33
the police, courts, DOR	(1719)	(6)	(108)	(6)
and SATOP has improved	(1/1/)	(0)	(100)	(0)
22. I better understand				
the relationship between	4.38	4.67	4.44	4.67
consumption/use (amount)	(1722)	(6)	(108)	(6)
and levels of impairment				

The first number represents a mean rating.

Scale: 1=Definitely do not agree . . . 5=Definitely agree.
The number in parentheses represents the number responding to
this item.

Some of the key findings were:

- The respondents of this agency reported that they were less likely to drink and drive in the future (mean of 4.67 1=definitely do not agree with the statement to 5=definitely agree with the statement).
- There was a better understanding of alcohol and drugs (mean of 5.00) and Missouri's DWI laws (mean of 4.67).
- The participants agreed less with the statement: "My attitude toward the police, courts, DOR and SATOP has improved" (mean of 4.33).

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Staff Attitude and Performance

	Total Consumers		<i>C</i> IP Program	
	State	Agency	State	Agency
23. Were you told of your	82.4	100.0	85.7	100.0
right to a second opinion?	(1350)	(6)	(90)	(6)
24. Were you told of your	78.0	100.0	75.0	100.0
right to a judicial review?	(1267)	(6)	(78)	(6)
25. Were you told of the six	68.8	100.0	78.6	100.0
month shelf-life rule?	(1109)	(6)	(81)	(6)
26. Did SATOP attempt to				
coerce or require you to				
attend some other (non-	21.5	66.7	30.5	66.7
SATOP) program which was	(350)	(4)	(32)	(4)
not required by the court or				
DOR?				

The first number represents the percent that answered "Yes".

The number in parentheses represents the number responding to this item.

Some of the key findings were:

- All of the participants reported that they were told about their right to a second opinion (100.0%).
- · All of the participants reported that they were told about the six-month shelf-life rule (100.0%).

It is important to note the answers to questions 23-25 do not necessarily reflect the performance of this agency, as clients are sometimes assessed at other agencies.

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Previous Feedback

The last page of the survey offered people the opportunity to address any issues by writing in comments. These hand-written comments were copied and faxed back to your agency as they were received. The primary purposes for this action was to allow for immediate feedback from the people you serve, to give you the opportunity to make any necessary improvements, and to pass along compliments to your staff.

Sampling Methodology

Consumer Satisfaction Forms were given to people served by ADA and CPS during April 2002. SATOP clients completing services during April of 2002 were asked to complete the SATOP Consumer Satisfaction Survey. For MRDD, data was collected through interviews.

People who received services from more than one program or agency received more than one survey. Therefore, some people completed more than one survey.

While this method may not have achieved a sufficient sample size to represent the opinions of all people who receive services from each provider, the survey has provided people with an opportunity to express their opinions and concerns. Giving the majority of people who receive DMH services a quick and simple way to express opinions and concerns about service quality is a major aim of this process.

Use of Data and Quality Improvement

The methods of data collection, the survey content and the survey results should all be considered in terms of quality improvement. The Missouri Department of Mental Health Satisfaction Survey has been designed as a quality improvement process, not as traditional mental health research.

There are two primary uses of this data. First, this data gives the Department of Mental Health an expression of the level of satisfaction of the people served by the Missouri DMH system as a whole.

Second, this data is designed to support quality improvement processes at the provider level. Each provider will have a basis upon which to compare the level of satisfaction of the people who receive services at their agency with other providers of their type and the state as a whole. This comparison makes it possible for each provider to improve the quality of the services they offer. In addition, each provider can get a clear idea of some of the issues that are important to the people they serve.

It is important to understand the context of services at each agency when interpreting the meaning of survey results. Differences in the population served at each agency, variations in service provision, and particular cultural characteristics of the community in which services take place must be taken into account as providers use this information to improve the quality of services. This report does not attempt to take into account these variations. As your agency engages in quality improvement, it is your responsibility to understand and take into account these local variations in order to make the most of the information contained within this report.

Please forward any suggestions for improvement of the survey process to Gary Harbison, Outcomes, Missouri Department of Mental Health, PO Box 687, Jefferson City, Missouri 65102. Additional information about survey results may be obtained by contacting Christine Rinck, Ph.D., University of Missouri-Kansas City Institute for Human Development, 2220 Holmes, 3rd Floor, Kansas City, Missouri 64108.

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